| Case 23-41975-m | nxm13 D | oc 10 Filed 07/19/23 E | Intered 07/19 | 9/23 10:13:05 | Desc Main |
|--|-----------------------|---|---------------------|---|--|
| Fill in this information to identif | y your case an | | 0141 | | |
| Debtor 1 Vincente First Name | Dwyr Middle | _ | | | |
| Debtor 2 (Spouse, if filing) First Name | Middle | Name Last Name | | | |
| United States Bankruptcy Court for | or the: | Northern District of | Гехаs | | |
| Case number 23-41975-M | XM-13 | | | | Check if this is an amended filing |
| Official Form 106A/E | 3_ | | | | |
| Schedule A/B: F | roperty | У | | | 12/15 |
| additional pages, write your n | ame and case | nformation. If more space is neede e number (if known). Answer every e, Building, Land, or Other Rea | question. | | |
| Do you own or have any le | gal or equitable | e interest in any residence, building, la | nd, or similar prop | erty? | |
| ✓ No. Go to Part 2. | . 0 | | | | |
| Yes. Where is the prope 1.1 Street address, if avaidescription | | What is the property? Check all that app Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | the a | amount of any secur | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the |
| | | ☐ Land ☐ Investment property | entire | property? | portion you own? |
| City State | ZIP Code | ☐ Timeshare ☐ Other | (such | , | our ownership interest ancy by the entireties, or |
| County | | Who has an interest in the property? Debtor 1 only | Check one. | estatej, ii kilowii. | |
| | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anot | (s | heck if this is come see instructions) | munity property |
| | | Other information you wish to add at property identification number: | | as local | |
| | - | vn for all of your entries from Part 1, in umber here | | | \$0.00 |
| Part 2: Describe You | ır Vehicles | | | | |
| | • | terest in any vehicles, whether they ar ehicle, also report it on Schedule G: Exec | • | • | es |

□ No
☑ Yes

Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

3.

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| | 3.1 | Make: | Chevrolet | Who has an interest in the property? Check one. | Do not deduct secured of | laims or exemptions. Put | |
|------|-------------|-------------------------|---------------------|--|--|--|--|
| | | Model: | Camaro SS | ☑ Debtor 1 only ☐ Debtor 2 only | | ed claims on Schedule D: ims Secured by Property. | |
| | | Year: | 2015 | ☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another | Current value of the | Current value of the | |
| | | Approximate mileage: | 81206 | ✓ Check if this is community property (see | entire property? \$17,800.00 | portion you own? \$17,800.00 | |
| | | Other information: | | instructions) | <u> </u> | <u> </u> | |
| | | VIN: 2G1FH1EJ4F91 | 32678 | | | | |
| | | | | | | | |
| | , | u own or have more than | • | | | | |
| | 3.2 | Make: | NISSAN | Who has an interest in the property? Check one. 1 Debtor 1 only | | laims or exemptions. Put ed claims on Schedule D: | |
| | | Model: | ALTIMA | Debtor 2 only | | ims Secured by Property. | |
| | | Year: | 2015 | Debtor 1 and Debtor 2 onlyAt least one of the debtors and another | Current value of the entire property? | Current value of the portion you own? | |
| | | Approximate mileage: | 115000 | ☑ Check if this is community property (see | \$10,000.00 | \$10,000.00 | |
| | | Other information: | | instructions) | | | |
| | | SON DRIVES AND P | AYS FOR | | | | |
| | | | | | | | |
| | ☐ Y 4.1 | Make: | | Who has an interest in the property? Check one. Debtor 1 only | | laims or exemptions. Put ed claims on Schedule D: | |
| | | Model: Year: | | Debtor 2 onlyDebtor 1 and Debtor 2 only | | aims Secured by Property. | |
| | | Other information: | | At least one of the debtors and another | Current value of the entire property? | Current value of the portion you own? | |
| | | | | Check if this is community property (see instructions) | | | |
| | | | | | | | |
| 5. | Add | the dollar value of the | portion you ov | wn for all of your entries from Part 2, including any | entries for pages _ | \$27,000,00 | |
| | you l | have attached for Part | 2. Write that no | umber here | → | \$27,800.00 | |
| Pa | art 3: | Describe Your | · Personal a | and Household Items | | | |
| Do y | ou ow | n or have any legal or | equitable inter | rest in any of the following items? | | Current value of the | |
| - | | , • | | , - | | portion you own? Do not deduct secured claims or exemptions. | |
| 6. | Hous | sehold goods and furn | ishings | | | | |
| | | mples: Major appliances | s, furniture, liner | ns, china, kitchenware | | | |
| | | | | | | | |
| | ∠ IY | es. Describe | furniture | | | \$700.00 | |

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Debtor Lockridge, Vincente Dwyne

| 7. | Electronics | |
|-----|---|----------|
| | Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music | |
| | collections; electronic devices including cell phones, cameras, media players, games | |
| | □ No | |
| | <u></u> | |
| | ✓ Yes. Describe various electronics | \$700.00 |
| | | |
| | | |
| 8. | Collectibles of value | |
| | Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or | |
| | baseball card collections; other collections, memorabilia, collectibles | |
| | ☑ No | |
| | Yes. Describe | |
| | Tes. Describe | |
| | | |
| 0 | Equipment for enerts and habbies | |
| 9. | Equipment for sports and hobbies | |
| | Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and | |
| | kayaks; carpentry tools; musical instruments | |
| | ☑ No | |
| | ☐ Yes. Describe | |
| | 100. 2000/100 | |
| | | |
| 10. | Firearms | |
| | | |
| | Examples: Pistols, rifles, shotguns, ammunition, and related equipment | |
| | ☑ No | |
| | ☐ Yes. Describe | |
| | | |
| | | |
| 11. | Clothes | |
| | Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories | |
| | Examples. Everyday clothes, fuls, leather coats, designer wear, shoes, accessories | |
| | □ No | |
| | ✓ Yes. Describe | 4000.00 |
| | Clothes, Shoes, Accessories | \$300.00 |
| | | |
| 12. | Jewelry | |
| | Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, | |
| | Silver | |
| | | |
| | □ No | |
| | ✓ Yes. Describe jewelry | \$700.00 |
| | Jeweny | Ψ100.00 |
| | | |
| 13. | Non-farm animals | |
| | Examples: Dogs, cats, birds, horses | |
| | | |
| | □ No | |
| | ✓ Yes. Describe dog | \$50.00 |
| | 4-9 | ψ00.00 |
| | | |
| 14. | Any other personal and household items you did not already list, including any health aids you did not list | |
| | ☑ No | |
| | | |
| | Yes. Give specific | |
| | information | |
| | | |

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Debtor Lockridge, Vincente Dwyne

| 15. | | of all of your entries from Part 3, including any entries for pages you have attact number here | |
|------|--|--|---|
| Pa | rt 4: Describe | Your Financial Assets | |
| Do y | ou own or have any leç | al or equitable interest in any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | Cash Examples: Money you | have in your wallet, in your home, in a safe deposit box, and on hand when you file y | our petition |
| | ☐ No ☑ Yes | Ca | sh: \$200.00 |
| 17. | and other | savings, or other financial accounts; certificates of deposit; shares in credit unions, br similar institutions. If you have multiple accounts with the same institution, list each. | okerage houses, |
| | ☐ No ✓ Yes | Institution name: | |
| | | 17.1. Checking account: | \$77.00 |
| | | 17.2. Savings account: | \$1.00 |
| 18. | · | or publicly traded stocks s, investment accounts with brokerage firms, money market accounts Institution or issuer name: | |
| 19. | Non-publicly traded s LLC, partnership, and ✓ No ☐ Yes. Give specific | tock and interests in incorporated and unincorporated businesses, including all joint venture | າ interest in an |
| | information about them | Name of entity: % of o | wnership: |
| | | | |
| | | | |

Debtor Lockridge, Vincente Dwyne

| 20. | Government and corp | orate bonds and other | r negotiable and non-negotiable instruments | |
|-----|---|---------------------------|---|--|
| | | | s, cashiers' checks, promissory notes, and money orders. not transfer to someone by signing or delivering them. | |
| | √ No | | | |
| | Yes. Give specific information about them | Issuer name: | | |
| | | | | |
| | | | | |
| | | | | |
| 21. | Retirement or pension | | | |
| | | IRA, ERISA, Keogn, 40 | 01(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans | |
| | ✓ No | | | |
| | Yes. List each account separately. | Type of account: | Institution name: | |
| | | 401(k) or similar plan: | | |
| | | Pension plan: | | |
| | | IRA: | | |
| | | Retirement account: | | |
| | | Keogh: | - | |
| | | Additional account: | | |
| | | Additional account: | | |
| 22. | Security deposits and | prepayments | | |
| | | | de so that you may continue service or use from a company | |
| | Examples: Agreements others | s with landlords, prepaid | d rent, public utilities (electric, gas, water), telecommunications companies, or | |
| | √ No | | | |
| | ☐ Yes | Ir | nstitution name or individual: | |
| | | Electric: | | |
| | | Gas: | | |
| | | Heating oil: | | |
| | | Security deposit on re | ntal unit: | |
| | | Prepaid rent: | | |
| | | Telephone: | | |
| | | Water: | | |
| | | Rented furniture: | | |
| | | Other: | | |
| | | | | |

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Debtor Lockridge, Vincente Dwyne

| 23. | | |
|-----|---|--|
| | ☑ No | |
| | Yes Issuer name and description: | |
| | | |
| | | |
| | | |
| 24. | Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). | |
| | ☑ No | |
| | Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): | |
| | | |
| | | |
| | | |
| 25. | Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit | |
| | ⊴ No | |
| | Yes. Give specific information about them | |
| | | |
| 26. | Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements | |
| | ✓ No | |
| | ☐ Yes. Give specific | |
| | information about them | |
| | | |
| 27. | Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses | |
| | ✓ No | |
| | ☐ Yes. Give specific | |
| | information about them | |
| Mon | ey or property owed to you? | Current value of the |
| | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owed to you | |
| | √ No | |
| | Yes. Give specific information about them, including whether you | |
| | already filed the returns and | |
| | the tax years | |
| | | |
| 29. | Family support | |
| | Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement | |

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| | ☑ No | | | |
|-----|---|--|--|----------------------------|
| | Yes. Give specific information | | Alimony: | |
| | | | Maintenance: | |
| | | | Support: | |
| | | | Divorce settlement: | |
| | | | | |
| | | | Property settlement: | |
| 30. | Other amounts someone owes you | | | |
| | | rance payments, disability benefits, sick pa aid loans you made to someone else | ay, vacation pay, workers' compensation, | |
| | √ No | | | _ |
| | Yes. Give specific information | | | |
| | | | |] |
| 31. | Interests in insurance policies | | | |
| | • | nce; health savings account (HSA); credit, | homeowner's, or renter's insurance | |
| | √ No | | | |
| | Yes. Name the insurance company of each policy and list its value | Company name: | Beneficiary: | Surrender or refund value: |
| | | | · | - |
| | | | | |
| | | | <u> </u> | |
| 32. | Any interest in property that is due you | from someone who has died | | |
| | | expect proceeds from a life insurance polic | cy, or are currently entitled to receive | |
| | ☑ No | | | |
| | ☐ Yes. Give specific information | | | 7 |
| | | | | |
| 33. | Claims against third parties, whether of Examples: Accidents, employment dispu | • | demand for payment | |
| | ☑ No | | | |
| | Yes. Describe each claim | | | 1 |
| | | | | |
| 34. | Other contingent and unliquidated clai | ms of every nature, including countercl | aims of the debtor and rights to set of | f |
| | ₫ No | | | |
| | Yes. Describe each claim | | | |
| | | | | |
| 35. | Any financial assets you did not alread | y list | | |
| | √ No | | | |
| | Yes. Give specific information | | | 1 |
| | | | | |

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| 36. | | dollar value of all of your entries from Part 4, including any entries for pages you have attached 4. Write that number here | \$278.00 |
|-----|---------------|--|---|
| Pai | rt 5: | Describe Any Business-Related Property You Own or Have an Interest In. List any | real estate in Part 1. |
| 37. | Do you o | own or have any legal or equitable interest in any business-related property? | |
| | ☐ No. 0 | Go to Part 6. | |
| | Yes. | Go to line 38. | |
| | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 38. | Account | s receivable or commissions you already earned | |
| | √ No | | |
| | ☐ Yes. | Describe |] |
| | | | |
| 39. | | quipment, furnishings, and supplies s: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs electronic devices | , |
| | √ No | | . |
| | ☐ Yes. | Describe | |
| 40. | Machine | ry, fixtures, equipment, supplies you use in business, and tools of your trade | l |
| | ☐ No | | 1 |
| | ⊻ Yes. | Describe Barber Chair, Barber Clippers | \$975.00 |
| 41. | Inventor | y | 1 |
| | √ No | | |
| | Yes. | Describe | |
| 42. | Interest | in partnerships or joint ventures | I |
| 72. | ✓ No | in partierships of joint ventures | |
| | | Describe | |
| | | Name of entity: % of ownership: | |
| | | name of only. | |
| | | | |
| | | | |
| | | | |
| 43. | Custome | er lists, mailing lists, or other compilations | |
| | √ No | | |
| | ☐ Yes. | Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? | |
| | | ☐ No | |
| | | ☐ Yes. Describe | |
| | | | |

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| 44. | Any business-related pr | operty you did not already list | |
|-----|--------------------------------|--|---|
| | ☑ No | | |
| | Yes. Give specific information | | |
| | | | |
| | | | |
| | • | | |
| | • | | |
| | | | |
| | | | . <u>-</u> |
| | | | |
| 45. | | all of your entries from Part 5, including any entries for pages you have attached nber here | \$975.00 |
| Pa | ι Ο. | ny Farm- and Commercial Fishing-Related Property You Own or Have an have an interest in farmland, list it in Part 1. | Interest In. |
| 46. | Do you own or have any | legal or equitable interest in any farm- or commercial fishing-related property? | |
| | ✓ No. Go to Part 7. | | |
| | Yes. Go to line 47. | | |
| | | | Current value of the |
| | | | portion you own? Do not deduct secured |
| | | | claims or exemptions. |
| 47. | Farm animals | | |
| | Examples: Livestock, po | ultry, farm-raised fish | |
| | ☑ No | | |
| | ☐ Yes | | |
| | | | |
| 48. | Crops—either growing | or harvested | |
| | ☑ No | | |
| | Yes. Give specific | | |
| | information | | |
| 49. | Farm and fishing equip | nent, implements, machinery, fixtures, and tools of trade | |
| | √ No | | |
| | ☐ Yes | | |
| | | | |
| 50. | Farm and fishing suppli | es, chemicals, and feed | |
| | ☑ No | | |
| | ☐ Yes | | |
| | | | |
| 51. | Any farm- and commerc | ial fishing-related property you did not already list | |
| | ☑ No | | |
| | Yes. Give specific information | | |
| | iiiiOiiiaiiOII | | |

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Debtor Lockridge, Vincente Dwyne

| 52. | Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here | \$0.00 |
|-----|---|--------------|
| Pa | rt 7: Describe All Property You Own or Have an Interest in That You Did Not List Above | |
| 53. | Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership | |
| | ✓ No ☐ Yes. Give specific information | |
| | | |
| 54. | Add the dollar value of all of your entries from Part 7. Write that number here | \$0.00 |
| Pa | rt 8: List the Totals of Each Part of this Form | |
| 55. | Part 1: Total real estate, line 2 | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 \$27,800.00 | |
| 57. | Part 3: Total personal and household items, line 15 \$2,450.00 | |
| 58. | Part 4: Total financial assets, line 36 \$278.00 | |
| 59. | Part 5: Total business-related property, line 45 \$975.00 | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 \$0.00 | |
| 61. | Part 7: Total other property not listed, line 54 + \$0.00 | |
| 62. | Total personal property. Add lines 56 through 61 | +\$31,503.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62. | \$31,503.00 |

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| Fill in this information to identify your case: | | | | | | | |
|---|----------------------|-------------|----------------------------|--|--|--|--|
| Debtor 1 | Vincente | Dwyne | Lockridge | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States Bankr | uptcy Court for the: | | Northern District of Texas | | | | |
| Case number | 23-41975-MXI | M-13 | | | | | |
| (if known) | | | | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | Part 1: Identify the Property You Claim as Exempt | | | | | | | |
|-------------------------|---|---|----------|--|--|--|--|--|
| 1. | ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) | | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property Schedule A/B that lists | | | | | | | |
| | | Copy the value from Check only one box for each exemption. Schedule A/B | | | | | | |
| 20 <u>VII</u> Lin | ef description: 15 Chevrolet Camaro SS 4: 2G1FH1EJ4F9132678 e from nedule A/B: 3.1 | \$17,800.00 | | \$4,450.00 100% of fair market value, up to any applicable statutory limit \$1,133.06 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(2) 11 U.S.C. § 522(d)(5) | | | |
| 20 SC Lin | ef description: 15 NISSAN ALTIMA N DRIVES AND PAYS FOR VEHICLE e from nedule A/B: 3.2 | \$10,000.00 | S | \$0.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(2) | | | |

Document Page 12 of 41 Debtor 1 Case number (if known) 23-41975-MXM-13 Vincente Dwyne Lockridge First Name Middle Name Last Name Part 2: Additional Page 3. Are you claiming a homestead exemption of more than \$189,050? (Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.) **√** No ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ☐ No

Yes

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Debtor 1 Vincente Lockridge Case number (if known) 23-41975-MXM-13 Dwyne First Name Middle Name Last Name Part 2: Additional Page Brief description of the property and line on Specific laws that allow exemption Current value of the Amount of the exemption you claim Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Brief description: $\sqrt{}$ \$700.00 11 U.S.C. § 522(d)(3) \$700.00 furniture 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: Brief description: $\mathbf{\Lambda}$ 11 U.S.C. § 522(d)(3) \$300.00 \$300.00 Clothes, Shoes, Accessories 100% of fair market value, up to any applicable statutory limit Line from 11 Schedule A/B: Brief description: $\sqrt{}$ \$200.00 11 U.S.C. § 522(d)(5) \$200.00 Cash 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 16 Brief description: \$77.00 11 U.S.C. § 522(d)(5) Checking account \$77.00 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: Brief description: $\mathbf{\Lambda}$ \$1.00 11 U.S.C. § 522(d)(5) \$1.00 Savings account 100% of fair market value, up

 $\mathbf{\Lambda}$

\$975.00

to any applicable statutory limit

\$975.00

100% of fair market value, up to any applicable statutory limit

11 U.S.C. § 522(d)(6)

Line from

Line from Schedule A/B:

Schedule A/B:

Brief description:

Barber Chair, Barber Clippers

17

40.1

IN RE: Lockridge, Vincente Dwyne

CASE NO 23-41975-MXM-13

CHAPTER Chapter 13

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: Federal

| N. | Catamani | Gross | Total | Total Familia | Total Amount | Total Amount |
|-----|--|----------------|--------------|---------------|--------------|--------------|
| No. | Category | Property Value | Encumbrances | Total Equity | Exempt | Non-Exemp |
| 1. | Real Estate | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 3. | Motor vehicle | \$27,800.00 | \$16,818.94 | \$10,981.06 | \$5,583.06 | \$5,398.00 |
| 4. | Watercraft, trailers, motors homes, and accessories | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 6. | Household goods and furnishings | \$700.00 | \$0.00 | \$700.00 | \$700.00 | \$0.00 |
| 7. | Electronics | \$700.00 | \$0.00 | \$700.00 | \$0.00 | \$700.00 |
| 8. | Collectibles of value | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 9. | Equipment for sports and hobbies | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 10. | Firearms | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 11. | Clothes | \$300.00 | \$0.00 | \$300.00 | \$300.00 | \$0.00 |
| 12. | Jewelry | \$700.00 | \$0.00 | \$700.00 | \$0.00 | \$700.00 |
| 13. | Nonfarm animals | \$50.00 | \$0.00 | \$50.00 | \$0.00 | \$50.00 |
| 14. | Other | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 16. | Cash | \$200.00 | \$0.00 | \$200.00 | \$200.00 | \$0.00 |
| 17. | Deposits of money | \$78.00 | \$0.00 | \$78.00 | \$78.00 | \$0.00 |
| 18. | Bonds, mutual funds, or publicly traded stocks | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 19. | Business Interests, LLC's, Partnerships, Joint Ventures and Nonpublicly traded stock | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 20. | Bonds and other financial instruments | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 21. | Retirement or pension accounts | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 22. | Security deposits and prepayments | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 23. | Annuities | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 24. | Interest in a qualified education fund, such as an education IRA | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 25. | Trusts, equitable or future interests in property | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 26. | Copyrights, trademarks, websites and other intellectual property | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 27. | Licenses, Franchises, and other general intangibles | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 28. | Tax refunds | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 29. | Family support | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 30. | Other amounts owed to the debtor | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 31. | Insurance policies | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 32. | Interest in property from deceased | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 33. | Claims against third parties | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |

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FORT WORTH DIVISION

IN RE: Lockridge, Vincente Dwyne CASE NO 23-41975-MXM-13

CHAPTER Chapter13

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #1

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: Federal

| N ₂ | Cotomomi | Gross | Total Encumbrances | Total Carrier | Total Amount | Total Amount |
|----------------|---|--------------------------|-----------------------|------------------------|-------------------------|----------------------|
| No. 34. | Category All other claims, includes contingent/unliquidated claims, counter claims, and creditor set | Property Value \$0.00 | \$0.00 | Total Equity \$0.00 | Exempt \$0.00 | Non-Exempt \$0.00 |
| | offs | | | | | |
| 35. | Other financial asset | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 38. | Accounts receivable | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 39. | Office equipment, furnishings, and supplies | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 40. | Machinery, fixtures and equipment | \$975.00 | \$0.00 | \$975.00 | \$975.00 | \$0.00 |
| 41. | Inventory | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 42. | Interests in partnerships or joint ventures | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 43. | Customer lists | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 44. | Other businessrelated property | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 47. | Farm animals | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 48. | Crops | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 49. | Equipment | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 50. | Supplies | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 51. | Other farm or fishing related property | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 53. | Other | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| | TOTALS: | \$31,503.00 | \$16,818.94 | \$14,684.06 | \$7,836.06 | \$6.848.00 |

NORTHERN DISTRICT OF TEXAS

FORT WORTH DIVISION

IN RE: Lockridge, Vincente Dwyne CASE NO 23-41975-MXM-13

CHAPTER Chapter13

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #2

Surrendered Property:

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder

| Property Description | Market Value | Lien | Equity |
|----------------------|--------------|--------|--------|
| Real Property | | | |
| (None) | | | |
| Personal Property | | | |
| (None) | | | |
| TOTALS: | \$0.00 | \$0.00 | \$0.00 |

Non-exempt Property by Item:

The following property, or a portion thereof, is non-exempt.

| Property Description | Market Value | Lien | Equity | Non-Exempt Amount |
|---|--------------|-------------|-------------|-------------------|
| Real Property | | | | |
| (None) | | | | |
| Personal Property | | | | |
| 2015 NISSAN ALTIMA SON DRIVES AND PAYS FOR VEHICLE | \$10,000.00 | \$4,602.00 | \$5,398.00 | \$5,398.00 |
| various electronics | \$700.00 | | \$700.00 | \$700.00 |
| jewelry | \$700.00 | | \$700.00 | \$700.00 |
| dog | \$50.00 | | \$50.00 | \$50.00 |
| TOTALS: | \$31.503.00 | \$16.818.94 | \$14.684.06 | \$6.848.00 |

| Summary | |
|--|-------------|
| A. Gross Property Value (not including surrendered property) | \$31,503.00 |
| B. Gross Property Value of Surrendered Property | \$0.00 |
| C. Total Gross Property Value (A+B) | \$31,503.00 |
| D. Gross Amount of Encumbrances (not including surrendered property) | \$16,818.94 |
| E. Gross Amount of Encumbrances on Surrendered Property | \$0.00 |
| F. Total Gross Encumbrances (D+E) | \$16,818.94 |
| G. Total Equity (not including surrendered property) / (A-D) | \$14,684.06 |
| H. Total Equity in surrendered items (B-E) | \$0.00 |
| I. Total Equity (C-F) | \$14,684.06 |
| J. Total Exemptions Claimed (Wild Card Used: \$1,411.06, Available: \$14,013.94) | \$7,836.06 |
| K. Total Non-Exempt Property Remaining (G-J) | \$6,848.00 |

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| | | | Document | Page 17 of 41 | | | |
|------------------------------------|--|--------------------------|--|----------------------|---|---|-----------------------------------|
| Fill in this inf | ormation to identify your case: | | | | | | |
| Debtor 1 | Vincente First Name | Dwyne Middle Name | Lockridge Last Name | | | | |
| Debtor 2 (Spouse, if fil | ing) First Name | Middle Name | Last Name | | | | |
| United State | es Bankruptcy Court for the: | | Northern District o | f Texas | | | |
| Case numb (if known) | er 23-41975-MXI | M-13 | | | | Check if amended | |
| Official I | Form 106D | | | | | | |
| Schedi | ule D: Creditor | s Who H | Have Clair | ns Secured | d by Prope | erty | 12/15 |
| 1. Do any cred No. Che | led, copy the Additional Page (if known). ditors have claims secured by eck this box and submit this fo in all of the information below st AII Secured Claims | y your property | ? | | , , | | e your name and |
| 2. List all s | ecured claims. If a creditor has ly for each claim. If more than in Part 2. As much as possib | one creditor ha | as a particular claim, | list the other | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 <u>Crescer</u> Creditor's | nt Bank & Trust, Inc. Name | | the property that se hevrolet Camaro SS | ecures the claim: | \$12,216.94 | \$17,800.00 | \$0.00 |
| Attn: Ba | nkruptcy | | iovidiot damard de | | | | |
| PO Box Number New Or City | 61813 Street leans, LA 70161 State ZIP Code | As of the apply. | date you file, the clain | m is: Check all that | | | |
| Who ow | es the debt? Check one. or 1 only | ☐ Unliqu ☐ Disput | | | | | |
| Debte | or 2 only | Nature of | f lien. Check all that | apply. | | | |
| | or 1 and Debtor 2 only | | reement you made (| such as mortgage | | | |
| anoth | | Statut | cured car loan) cory lien (such as tax | lien, mechanic's | | | |
| | k if this claim relates to a munity debt | lien) □Judgn | nent lien from a laws | uit | | | |
| | ot was incurred | _ | (including a right to | | | | |

5/1/2020

Remarks: In Plan

Last 4 digits of account number 7 4 7 1

Add the dollar value of your entries in Column A on this page. Write that number here:

\$12,216.94

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Debtor 1 Vincente Lockridge Case number (if known) 23-41975-MXM-13 Dwyne First Name Middle Name Last Name Column A Column B Column C Additional Page Amount of claim Unsecured Value of Part 1: After listing any entries on this page, number them beginning with collateral that portion Do not deduct the 2.3, followed by 2.4, and so forth. value of supports this If any claim collateral. \$4.602.00 \$10.000.00 \$0.00 Owings Auto Centers Describe the property that secures the claim: Creditor's Name 2015 NISSAN ALTIMA 519 E Division St SON DRIVES AND PAYS FOR VEHICLE Number Street As of the date you file, the claim is: Check all that Arlington, TX 76011 apply. ZIP Code City State □ Contingent Who owes the debt? Check one. **✓** Debtor 1 only Unliquidated Debtor 2 only Disputed Debtor 1 and Debtor 2 only Nature of lien. Check all that apply. At least one of the debtors and An agreement you made (such as mortgage another or secured car loan) Check if this claim relates to a Statutory lien (such as tax lien, mechanic's community debt lien) ☐ Judgment lien from a lawsuit Date debt was incurred 11/1/2019 Other (including a right to offset) Last 4 digits of account number 2 6 1 8 Add the dollar value of your entries in Column A on this page. Write that number here: \$4,602.00 If this is the last page of your form, add the dollar value totals from all pages. Write that number \$16.818.94 here:

Case 23-41975-mxm13 Doc 10 Filed 07/19/23 Entered 07/19/23 10:13:05 Desc Main Fill in this information to identify your case: Debtor 1 Lockridge Vincente Dwvne First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name **Northern District of Texas** United States Bankruptcy Court for the: Check if this is an 23-41975-MXM-13 Case number (if known) amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? No. Go to Part 2. ✓ Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total **Priority** Nonpriority amount amount \$4,250.00 \$4,250.00 \$0.00 Leinart Law Firm Last 4 digits of account number _ Priority Creditor's Name When was the debt incurred? 07/07/2023 10670 N Central Expy Ste 320 As of the date you file, the claim is: Check all that Number Street Dallas, TX 75231-2173 Contingent State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed ✓ Debtor 1 only Type of PRIORITY unsecured claim: ☐ Debtor 2 only ☐ Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the At least one of the debtors and another government Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Is the claim subject to offset? Other. Specify **☑** No Attorney Fees ☐ Yes

Case 23-41975-mxm13 Doc 10 Filed 07/19/23 Entered 07/19/23 10:13:05 Desc Main Page 20 of 41 Case number (if known) 23-41975-MXM-13 Debtor 1 First Name Middle Name Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. ✓ Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim \$167.00

| Affirm, Inc. Nonpriority Creditor's Name Attn: Bankruptcy 30 Isabella St, Floor 4 Number Street Pittsburgh, PA 15212 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | Last 4 digits of account number CJ2B When was the debt incurred? 05/01/2022 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Unsecured | \$107.00 |
|--|---|----------|
| Affirm, Inc. Nonpriority Creditor's Name Attn: Bankruptcy 30 Isabella St, Floor 4 Number Street Pittsburgh, PA 15212 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | Last 4 digits of account number N79W When was the debt incurred? 12/01/2022 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Unsecured | \$77.00 |

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Vincente First Name Middle Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$53.00 4.3 Affirm, Inc. Last 4 digits of account number 8L8L Nonpriority Creditor's Name When was the debt incurred? __11/01/2022 Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. 30 Isabella St, Floor 4 Contingent Number Unliquidated Pittsburgh, PA 15212 City State ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other ■ At least one of the debtors and another similar debts Check if this claim is for a community debt Other. Specify Is the claim subject to offset? Unsecured **☑** No ☐ Yes \$52.00 Affirm, Inc. Last 4 digits of account number RBSA Nonpriority Creditor's Name When was the debt incurred? 12/01/2022 Attn: Bankruptcy

Case number (if known) 23-41975-MXM-13

First Name Middle Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| Doub of America | Leaf A Malte of account womber 2070 | \$747 |
|---|---|-------|
| Bank of America Nonpriority Creditor's Name | Last 4 digits of account number 8079 | |
| Attn: Bankruptcy Dept | When was the debt incurred? 05/01/2019 | |
| PO Box 982234 | As of the date you file, the claim is: Check all that apply. | |
| Number Street | Contingent | |
| El Paso, TX 79998 | Unliquidated | |
| City State ZIP Code | ☐ Disputed | |
| Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | ☐ Student loans | |
| Debtor 2 only | Obligations arising out of a separation agreement or | |
| Debtor 1 and Debtor 2 only | divorce that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Check if this claim is for a community debt | Other. Specify | |
| the claim subject to offset? | CreditCard | |
| √ No | | |
| ☐ Yes | | |
| Comenity/Cosmo Prof | Last 4 digits of account number 1389 | \$0 |
| Nonpriority Creditor's Name | When was the debt incurred? 03/01/2021 | |
| Attn: Bankruptcy | As of the date you file, the claim is: Check all that apply. | |
| PO Box 182125 | — Contingent | |
| Number Street | ☐ Unliquidated | |
| Columbus, OH 43218 City State ZIP Code | · | |
| Who incurred the debt? Check one. | ☐ Disputed | |
| | Type of NONPRIORITY unsecured claim: | |
| | Student loans | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other | |
| At least one of the debtors and another | similar debts | |
| Check if this claim is for a community debt | ☑ Other. Specify | |
| | CreditCard | |

Case number (if known) 23-41975-MXM-13

First Name Middle Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| After listing any entries on this page, number them beginning | g with 4.5, followed by 4.6, and so forth. | Total claim |
|--|--|-----------------|
| Attn: Bankruptcy Department PO Box 98873 Number Street Las Vegas, NV 89193 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | Last 4 digits of account number 7298 When was the debt incurred? 02/01/2020 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CreditCard | <u>\$651.00</u> |
| 4.8 Credit One Bank Nonpriority Creditor's Name Attn: Bankruptcy Department PO Box 98873 Number Street Las Vegas, NV 89193 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes | Last 4 digits of account number 3966 When was the debt incurred? 04/01/2021 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CreditCard | \$0.00 |

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Vincente Dwyne DOCONTINE
First Name Middle Name Last Nam

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$0.00 4.9 **Crest Financial** Last 4 digits of account number 2892 Nonpriority Creditor's Name When was the debt incurred? 09/01/2016 Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. 61 West 13490 South Contingent Unliquidated Number Street **Draper, UT 84020** Disputed ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans **☑** Debtor 1 only Obligations arising out of a separation agreement or Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other Debtor 1 and Debtor 2 only similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Lease Is the claim subject to offset? **☑** No ☐ Yes \$0.00 4.10 **Crest Financial** Last 4 digits of account number 2891 Nonpriority Creditor's Name When was the debt incurred? 02/01/2015 Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. 61 West 13490 South Contingent ■ Unliquidated Number Street Disputed Draper, UT 84020 State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans **☑** Debtor 1 only Obligations arising out of a separation agreement or Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other Debtor 1 and Debtor 2 only similar debts □ At least one of the debtors and another $\mathbf{\Delta}$ Other. Specify ☐ Check if this claim is for a community debt UnknownLoanType Is the claim subject to offset?

✓ No ☐ Yes

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First Name Middle Name

Case number (if known) 23-41975-MXM-13

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| Nonpriority Creditor's Name Attn: Bankruptcy PO Box 696000 Number Street San Antonio, TX 78260 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? | Last 4 digits of account number 0000 When was the debt incurred? 11/01/2019 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify UnknownLoanType | \$485.0 |
|---|---|----------------|
| Midland Funding/Midland Credit Mgmt Nonpriority Creditor's Name Attn: Bankruptcy PO Box 939069 Number Street San Diego, CA 92193 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? | Last 4 digits of account number 4373 When was the debt incurred? 11/01/2022 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Original Creditor: COMENITY CAPITAL BANK | <u>\$489.0</u> |

First Name Middle Name Last Name

Case number (if known) 23-41975-MXM-13

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| | | #C 000 |
|---|---|----------|
| Navy FCU | Last 4 digits of account number 6211 | \$6,303. |
| Nonpriority Creditor's Name | When was the debt incurred? 11/01/2021 | |
| Attn: Bankruptcy | As of the date you file, the claim is: Check all that apply. | |
| PO Box 3000 | Contingent | |
| Number Street | ☐ Unliquidated | |
| Merrifield, VA 22119 City State ZIP Code | Disputed | |
| Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | Student loans | |
| Debtor 2 only | | |
| | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other | |
| At least one of the debtors and another | similar debts | |
| ☐ Check if this claim is for a community debt | ☑ Other. Specify CreditCard | |
| Is the claim subject to offset? | | |
| ☑ No | | |
| Yes | | |
| Navy FCU | Last 4 digits of account number 6211 | unknov |
| Nonpriority Creditor's Name | When was the debt incurred? 11/01/2021 | |
| Attn: Bankruptcy | As of the date you file, the claim is: Check all that apply. | |
| PO Box 3000 | — Contingent | |
| Number Street | ☐ Unliquidated | |
| Merrifield, VA 22119 City State ZIP Code | Disputed | |
| Who incurred the debt? Check one. | · | |
| Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Student loans | |
| ☐ Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ☐ Debtor 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other | |
| At least one of the debtors and another | similar debts | |
| Check if this claim is for a community debt | ☑ Other. Specify | |
| Is the claim subject to offset? | CreditCard | |
| √ No | | |
| ☑ No | | |

Part 2:

Case number (if known) 23-41975-MXM-13

Your NONPRIORITY Unsecured Claims - Continuation Page

Middle Name First Name

| After | listing any entries on this page, number them beginning w | ith 4.5, followed by 4.6, and so forth. | Total claim |
|-------|--|---|--------------------|
| 4.16 | Personify Financial Nonpriority Creditor's Name Attn: Bankruptcy Department PO Box 208417 Number Street Dallas, TX 92150 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | Last 4 digits of account number 073A When was the debt incurred? 03/16/2022 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Unsecured | \$0.00 |
| 4.17 | Pnix Rec Grp Nonpriority Creditor's Name 1045 Cheever Blvd Number Street San Antonio, TX 78217 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | Last 4 digits of account number 2457 When was the debt incurred? 03/01/2023 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Original Creditor: REPUBLIC COMMERCIAL PROPERTIES | <u>\$16,872.00</u> |

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 Vincente
 Dwyne
 Dolodiffié

 First Name
 Middle Name
 Last Nam

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$0.00 4.18 **Possible Finance** Last 4 digits of account number OJPG Nonpriority Creditor's Name When was the debt incurred? 02/01/2023 2231 First Avenue Suite B As of the date you file, the claim is: Check all that apply. Street Contingent Seattle, WA 98121 City State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? Other. Specify **☑** No Unsecured ☐ Yes \$0.00 4.19 Westcreek Fi Last 4 digits of account number 86X2 Nonpriority Creditor's Name When was the debt incurred? 10/08/2020 Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. Po Box 5518 Contingent Number Street Unliquidated Glen Allen, VA 23058 ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other At least one of the debtors and another similar debts Check if this claim is for a community debt $\mathbf{\Lambda}$ Other, Specify

Lease

Is the claim subject to offset?

✓ No ☐ Yes

Middle Name First Name Last Name

| Nonpriority Creditor's Name Attn: Bankruptcy Po Box 5518 Number Street Glen Allen, VA 23058 When was the debt incurred? 03/25/2019 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated | |
|---|---------------|
| Nonpriority Creditor's Name Attn: Bankruptcy Po Box 5518 Number Street Glen Allen, VA 23058 When was the debt incurred? 03/25/2019 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated | |
| Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes | <u>\$0.00</u> |

Debtor 1 First Name

Middle Name Last Name

| 6. Total the a | the Amounts for Each Type of Unsecured Claim mounts of certain types of unsecured claims. This inform pe of unsecured claim. | | atistical reporting purposes only. 28 | U.S.C. §159. Add the amo |
|----------------------------|--|--------------|---------------------------------------|--------------------------|
| | | | Total claim | |
| otal claims | 6a. Domestic support obligations | 6a. | \$0.00 | |
| from Part 1 | 6b. Taxes and certain other debts you owe the government | 6b. | \$0.00 | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. + | \$4,250.00 | 1 |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$4,250.00 | |
| | | | Total claim | |
| otal claims | 6f. Student loans | 6f. | \$0.00 | |
| Total claims rom Part 2 | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. + | \$25,896.00 | 1 |
| | 6j. Total. Add lines 6f through 6i. | 6j. | \$25,896.00 | |

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| Fill in this information | to identify your case: | | | |
|---------------------------|------------------------|-------------|----------------------------|--|
| Debtor 1 | Vincente | Dwyne | Lockridge | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bankr | ruptcy Court for the: | | Northern District of Texas | |
| Case number (if known) | 23-41975-MXI | M-13 | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☑ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or o | company with whom | ı you ha | ve the contract or lease | State what the contract or lease is for |
|-----|-------------|-------------------|----------|--------------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.3 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| | | | | | |

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| | | | z o o a | 32 31 12 | |
|---------------------------|------------------------|----------------------|------------------------------|--------------------------------|--|
| Fill in this information | on to identify your ca | ase: | | | |
| Debtor 1 | Vincente | Dwyne | Lockridge | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Bank | kruptcy Court for the | e: | Northern District of Texas | | |
| Case number (if known) | 23-41975- | MXM-13 | | | Check if this is an amended filing |
| Official Forn | n 106H | | | | |
| Schedule | H: Your C | odebtors | | | 12 |
| together, both are ec | qually responsible t | for supplying correc | t information. If more space | e is needed, copy the Addition | possible. If two married people are filin onal Page, fill it out, and number the en me and case number (if known). Answe |

Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) **√** No ☐ Yes Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? Yes. In which community state or territory did you live? Texas . Fill in the name and current address of that person. Lockridge, Misty Mechelle Name of your spouse, former spouse, or legal equivalent 4328 Endicott Dr Number Street Grand Prairie, TX 75052 ZIP Code State In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Check all schedules that apply: ☐ Schedule D, line ___ Name Schedule E/F. line ___ Schedule G, line _____ Number Street City State ZIP Code

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| Fill in this information | on to identify your case | : | | |
|--------------------------|--------------------------|-------------|---------------------------|----------|
| Debtor 1 | Vincente | Dwyne | Lockridge | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bar | kruptcy Court for the: | | Northern District of Texa | <u>s</u> |
| Case number (if known) | 23-41975-MX | M-13 | | |
| | | | | |

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| add | itional pages, write your name and | case number (if known). An | swer every question | on. | | |
|-----|--|-----------------------------------|----------------------------------|----------------------|------------------------------|-----------------------------------|
| Pa | rt 1: Describe Employment | | | | | |
| 1. | Fill in your employment information. | | Debtor 1 | | Debtor 2 | 2 or non-filing spouse |
| | If you have more than one job, attach a separate page with | Employment status | ☑ Employed □ | Not Employed | ☑ Employe | d Not Employed |
| | information about additional employers. | Occupation | Barber | | Nurse | |
| | Include part time, seasonal, or | Employer's name | GP's Boss Cuts E | Barber | North Hills F | amily Medicine |
| | self-employed work. Occupation may include student | Employer's address | 2304 Oak Lane B Number Street | lldg. 3B 106 | 4351 Booth Number Stre | , |
| | or homemaker, if it applies. | | | | | |
| | | | | | | |
| | | | Grand Prairie, TX | 75051 State Zip 0 | | nd Hills, TX 76180 State Zip Code |
| | | How long employed there? | ? 10 Yrs | | <u>10 Yrs</u> | |
| Pa | art 2: Give Details About Mor | nthly Income | | | | |
| | Estimate monthly income as of the | ne date you file this form. If yo | ou have nothing to | report for any line | , write \$0 in the space. Ir | nclude your non-filing spouse |
| | unless you are separated. If you or your non-filing spouse ha more space, attach a separate she | | combine the inform | ation for all emplo | yers for that person on th | ne lines below. If you need |
| | | | | For Debte | or 1 For Debtor 2 c | • |
| 2. | List monthly gross wages, salary deductions.) If not paid monthly, ca | | | \$0 | .00 \$4,37 | 7.84 |
| 3. | Estimate and list monthly overting | ne pay. | 3. | +\$0 |).00 <u> </u> | 0.00 |
| 4. | Calculate gross income. Add line | 2 + line 3. | 4. | \$0 | 0.00 \$4,37 | 7.84_ |

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Debtor 1 Vincente Dwyne Lockridge Case number (if known) 23-41975-MXM-13

Last Name

First Name

Middle Name

| | | | For Debtor 1 | | or Debtor 2 or on-filing spouse | |
|-----|--|---------|--------------|-------|---------------------------------|-------------------------|
| | Copy line 4 here→ | 4. | \$0.00 | | \$4,377.84 | |
| 5. | List all payroll deductions: | | | | | |
| | 5a. Tax, Medicare, and Social Security deductions | 5a. | \$0.00 | | \$584.92 | |
| | 5b. Mandatory contributions for retirement plans | 5b. | \$0.00 | , | \$0.00 | |
| | 5c. Voluntary contributions for retirement plans | 5c. | \$0.00 | , | \$40.00 | |
| | 5d. Required repayments of retirement fund loans | 5d. | \$0.00 | | \$222.18 | |
| | 5e. Insurance | 5e. | \$0.00 | , | \$604.18 | |
| | 5f. Domestic support obligations | 5f. | \$0.00 | | \$0.00 | |
| | 5g. Union dues | 5g. | \$0.00 | , | \$0.00 | |
| | 5h. Other deductions. Specify: | 5h. | + \$0.00 | + | \$0.00 | |
| 6. | Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. | 6. | \$0.00 | | \$1,451.28 | |
| 7. | Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$0.00 | , | \$2,926.56 | |
| 8. | List all other income regularly received: | | | | <u> </u> | |
| 0. | 8a. Net income from rental property and from operating a business, profession, or farm | | | | | |
| | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$3,980.62 | | \$0.00 | |
| | 8b. Interest and dividends | 8b. | \$0.00 | , | \$0.00 | |
| | 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive | OD. | <u> </u> | • | φ0.00 | |
| | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$0.00 | | \$0.00 | |
| | 8d. Unemployment compensation | 8d. | \$0.00 | | \$0.00 | |
| | 8e. Social Security | 8e. | \$0.00 | | \$0.00 | |
| | 8f. Other government assistance that you regularly receive | | | | | |
| | Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | | | | | |
| | Specify: | 8f. | \$0.00 | | \$0.00 | |
| | 8g. Pension or retirement income | 8g. | \$0.00 | | \$0.00 | |
| | 8h. Other monthly income. Specify: | 8h. | + \$0.00 | + | \$0.00 | |
| 9. | Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9. | \$3.980.62 | | \$0.00 | |
| 10. | Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse | 10. | \$3,980.62 |]+[| \$2,926.56 | = \$6,907.18 |
| 11. | State all other regular contributions to the expenses that you list in Scheo | dule J. | | | | |
| | Include contributions from an unmarried partner, members of your household friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that a | | , , , | | • | |
| | Specify: | | | | 11. - | + \$0.00 |
| 12. | Add the amount in the last column of line 10 to the amount in line 11. The amount on the Summary of Your Assets and Liabilities and Certain Statistics | | | incom | ne. Write that | \$6,907.18 |
| | | | | | | Combined monthly income |
| 13. | Do you expect an increase or decrease within the year after you file this fo | orm? | | | | |
| | ☑ No. | | | | | |
| | Yes. Explain: | | | | | |

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Lockridge

Debtor 1

Vincente

Dwyne

Case number (if known) 23-41975-MXM-13

First Name Middle Name Last Name 8a. Attached Statement **Barber** FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.) PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME: 1. Gross Monthly Income: \$4,800.00 PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES: Ordinary and necessary expense \$0.00 3. Net Employee Payroll (Other than debtor) \$0.00 Payroll Taxes \$0.00 4. **Unemployment Taxes** 5. \$0.00 6. Worker's Compensation \$0.00 7. Other Taxes \$0.00 Inventory Purchases (Including raw materials) \$100.00 8. Purchase of Feed/Fertilizer/Seed/Spray \$0.00 10. Rent (Other than debtor's principal residence) \$255.00 11. Utilities \$70.00 12. Office Expenses and Supplies \$0.00 \$0.00 13. Repairs and Maintenance 14. Vehicle Expenses \$250.00 \$0.00 15. Travel and Entertainment 16. Equipment Rental and Leases \$0.00 17. Legal/Accounting/Other Professional Fees \$144.38 18. Insurance \$0.00 19. Employee Benefits (e.g., pension, medical, etc.) \$0.00 20. Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition **Business Debts** TOTAL PAYMENTS TO SECURED CREDITORS \$0.00 21. Other Expenses TOTAL OTHER EXPENSES \$0.00 \$819.38 22. TOTAL MONTHLY EXPENSES(Add item 2 - 21) PART C - ESTIMATED AVERAGE NET MONTHLY INCOME: 23. AVERAGE NET MONTHLY INCOME(Subtract item 22 from item 1) \$3,980.62

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| Fill in this information | to identify your case: | | | |
|---|------------------------|--------------------------|----------------------------|--|
| Debtor 1 | Vincente First Name | Dwyne Middle Name | Lockridge Last Name | Check if this is: |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | An amended filing A supplement showing postpetition chapter 13 expenses as of the following date: |
| United States Bankruptcy Court for the: | | | Northern District of Texas | |
| Case number (if known) | 23-41975-MXI | M-13 | | MM / DD / YYYY |

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question

| spa | ce is needed, attach another sneet to | o this form. On the top of any addi | tional pages, write your name and ca | se number (ii k | nown). Answer every question. |
|-----------|--|--|---|---------------------|-------------------------------|
| Pa | rt 1: Describe Your Househole | d | | | |
| 1. | Is this a joint case? | | | | |
| | ✓ No. Go to line 2. | | | | |
| | Yes. Does Debtor 2 live in a sep | arate household? | | | |
| | □ _{No} | | | | |
| | | Official Form 106J-2, Expenses for | r Separate Household of Debtor 2. | | |
| 2. | Do you have dependents? Do not list Debtor 1 and Debtor 2. | ☐ No ☑ Yes. Fill out this information | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
| | Do not state the dependents' | for each dependent | Child | 19 | |
| | names. | | | | — □No. □Yes. |
| | | | | | |
| | | | | | — |
| | | | | | — ☐ No. ☐ Yes. |
| | | | | | — □No. □Yes. |
| 3. | Do your expenses include expenses of people other than yourself and your dependents? | ☑ No □ Yes | | | |
| | | | | | |
| Pa | art 2: Estimate Your Ongoing I | Monthly Expenses | | | |
| | | | e using this form as a supplement in a neck the box at the top of the form and | | |
| | | • | • | u iiii iii the appi | icable date. |
| Ind Su | clude expenses paid for with non-ca ch assistance and have included it o | sh government assistance if you k on <i>Schedule I: Your Income</i> (Offici | know the value of al Form 106l.) | Yo | our expenses |
| 4. | The rental or home ownership exp for the ground or lot. | enses for your residence. Include | first mortgage payments and any rent | 4 | \$2,250.00 |
| | If not included in line 4: | | | | |
| | 4a. Real estate taxes | | | 4a | \$0.00 |
| | 4b. Property, homeowner's, or rente | er's insurance | | 4b | \$35.00 |
| | 4c. Home maintenance, repair, and | upkeep expenses | | 4c | \$0.00 |
| | 4d. Homeowner's association or cor | ndominium dues | | 4d. | \$0.00 |
| | | | | | |

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 Debtor 1
 Vincente
 Dwyne
 Lockridge
 Case number (if known) 23-41975-MXM-13

 First Name
 Middle Name
 Last Name

| | Yo | our expenses |
|---|--------|--------------|
| 5. Additional mortgage payments for your residence, such as home equity loans | 5. | \$0.00 |
| 5. Utilities: | | |
| 6a. Electricity, heat, natural gas | 6a. — | \$300.00 |
| 6b. Water, sewer, garbage collection | 6b | \$60.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c | \$42.00 |
| 6d. Other. Specify: Internet/TV | 6d | \$50.00 |
| Food and housekeeping supplies | 7 | \$900.00 |
| . Childcare and children's education costs | 8. | \$0.00 |
| Clothing, laundry, and dry cleaning | 9 | \$200.00 |
| Personal care products and services | 10. | \$150.00 |
| Medical and dental expenses | 11 | \$150.00 |
| Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | \$500.00 |
| 3. Entertainment, clubs, recreation, newspapers, magazines, and books | 13 | \$200.00 |
| 4. Charitable contributions and religious donations | 14. | \$0.00 |
| Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | 15a. — | \$0.00 |
| 15b. Health insurance | 15b | \$0.00 |
| 15c. Vehicle insurance | 15c | \$398.00 |
| 15d. Other insurance. Specify: | 15d | \$0.00 |
| 6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | |
| Specify: Income tax | 16. | \$500.00 |
| 7. Installment or lease payments: | | |
| 17a. Car payments for Vehicle 1 | 17a | \$450.00 |
| 17b. Car payments for Vehicle 2 | | \$0.00 |
| 17c. Other. Specify: | 17c | \$0.00 |
| 17d. Other. Specify: | 17d. | \$0.00 |
| 8. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). | 18 | \$0.00 |
| 9. Other payments you make to support others who do not live with you. | | |
| Specify: | 19 | \$0.00 |
| 0. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income | e. | |
| 20a. Mortgages on other property | 20a | \$0.00 |
| 20b. Real estate taxes | 20b | \$0.00 |
| 20c. Property, homeowner's, or renter's insurance | 20c | \$0.00 |
| 20d. Maintenance, repair, and upkeep expenses | 20d. | \$0.00 |
| 20e. Homeowner's association or condominium dues | 20e. | \$0.00 |

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| Debtor 1 | Vincente First Name | Dwyne Middle Name | Lockridge Last Name | Case number (if known, | 23-41975-MXM-13 |
|---|--------------------------------|--------------------------|--|------------------------|-----------------|
| 21. Other | Specify: | pet care | | 21. + | \$100.00 |
| 2. Calcu | late your monthly exp | enses. | | | |
| 22a. <i>A</i> | add lines 4 through 21. | | | 22a | \$6,285.00 |
| 22b. C | Copy line 22 (monthly e | expenses for Debtor 2), | if any, from Official Form 106J-2 | 22b | \$0.00 |
| 22c. A | dd line 22a and 22b. | The result is your month | 22c | \$6,285.00 | |
| 3. Calcu | late your monthly net | income. | | | |
| 23a. C | Copy line 12 (your com | bined monthly income) | from Schedule I. | 23a. <u> </u> | \$6,907.18 |
| 23b. C | Copy your monthly exp | enses from line 22c abo | ove. | 23b. _ | \$6,285.00 |
| 23c. Subtract your monthly expenses from your monthly income. | | | | | |
| ٦ | he result is your <i>mon</i> t | thly net income. | | 23c | \$622.18 |
| For ex | ample, do you expect | to finish paying for you | penses within the year after you file car loan within the year or do you e e of a modification to the terms of you | xpect your | |
| √ No ☐Ye | inone | | | | |

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| Fill in this information to identify your case: | | | | | | |
|---|-----------------|----------------------------|-----------|--|--|--|
| Debtor 1 | Vincente | Dwyne | Lockridge | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: | | Northern District of Texas | | | | |
| Case number (if known) | 23-41975-MXM-13 | | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Part 1: Summarize Your Assets | |
|--|-----------------------------------|
| | Your assets Value of what you own |
| 1. Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | φυ.υυ |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$31,503.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$31,503.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$16,818.94 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$4,250.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | + \$25,896.00 |
| Your total liabilities | \$46,964.94 |
| Part 3: Summarize Your Income and Expenses | |
| 4. Schedule I: Your Income (Official Form 106I) | |
| Copy your combined monthly income from line 12 of Schedule I | \$6,907.18 |
| 5. Schedule J: Your Expenses (Official Form 106J) | |
| Copy your monthly expenses from line 22c of Schedule J | \$6,285.00 |
| | |

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Debtor 1 <u>Vincente</u> Case number (if known) 23-41975-MXM-13

First Name Middle Name Last Name Answer These Questions for Administrative and Statistical Records Part 4: 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. **√** Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$8.463.26 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: **Total claim** From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e.Obligations arising out of a separation agreement or divorce that you did not report as priority \$0.00 claims. (Copy line 6g.) 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) \$0.00 9g. Total. Add lines 9a through 9f. \$0.00

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| Fill in this information to identify your case: | | | | | | |
|---|-----------------|----------------------------|-----------|--|--|--|
| Debtor 1 | Vincente | Dwyne | Lockridge | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: | | Northern District of Texas | | | | |
| Case number (if known) | 23-41975-MXM-13 | | | | | |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | | | | | | | |
|--|---|--|--|--|--|--|--|
| | | | | | | | |
| Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | | |
| ☑ No | | | | | | | |
| Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | | | |
| | | | | | | | |
| Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. | | | | | | | |
| | | | | | | | |
| X /s/ Vincente Dwyne Lockridge | | | | | | | |
| Vincente Dwyne Lockridge, Debtor 1 | | | | | | | |
| Date <u>07/19/2023</u> | | | | | | | |
| MM/ DD/ YYYY | | | | | | | |